United States Bankruptcy Co Eastern District of Washingt						y Petition
Name of Debtor (if individual, enter Last, First, Middle):		Name of Joint Debtor (Spouse) (Last, First, Middle):				
Castillo, Sixto S.		Castillo, A	mberose			
All Other Names used by the Debtor in the last 8 years		All Other Names used by the Joint Debtor in the last 8 years				
(include married, maiden, and trade names): None		None None	(include married, maiden, and trade names):			
Tione		Tronc				
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (I' (if more than one, state all): 5960	ΓΙΝ) No./Complete EIN	Last four digits (if more than on		ndividual-Ta 0377	axpayer I.D. (ITI	N) No./Complete EIN
Street Address of Debtor (No. and Street, City, and State) 401 Elva Way		Street Address 401 Elva V		(No. and Stro	eet, City, and Sta	ite
East Wenatchee, WA	ZIPCODE 98802	East Wena	tchee, WA			ZIPCODE
County of Residence or of the Principal Place of Business		County of Residence or of the Principal Place of Business:				
Douglas		Douglas				
Mailing Address of Debtor (if different from street addres	s):	Mailing Addre	ss of Joint Debto	or (if differen	nt from street add	lress):
	amaon n					- Company
	ZIPCODE					ZIPCODE
Location of Principal Assets of Business Debtor (if different	nt from street address a	bove):				ZIPCODE
						ZII CODE
Type of Debtor (Form of Organization)	Nature of Business (Check one box)		Cha	pter of Banl	kruptcy Code U is Filed (Check	nder Which
(Check one box) Individual (includes Joint Debtors)	Health Care Busines		Chapter 7	ine i ention	Chapter 15 P	*
See Exhibit D on page 2 of this form.	Single Asset Real Es 11 U.S.C. § 101 (51)		☐ Chapter 9		Recognition of	of a Foreign
Corporation (includes LLC and LLP) Partnership	Railroad Stockbroker		☐ Chapter 11		Main Procee	0
Other (If debtor is not one of the above entities,	Commodity Broker		☐ Chapter 12	² \Box	Chapter 15 Po Recognition of	
check this box and state type of entity below.)	Clearing Bank Other N.A.		Chapter 13	3	Nonmain Pro	
Chapter 15 Debtors Tax-Exempt Entity Nature of Debts						
Country of debtor's center of main interests:	(Cneck box, if ap	рисавіе)	Debts are	primarily co	ck one box) onsumer	Dobto one
	Debtor is a tax-exe	mpt organization debts, defined in 11 U.S.C. primarily			Debts are primarily	
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	under Title 26 of the Code (the Internal l	Revenue Code) individual primarily for a			business debts.	
		,	personal,	family, or l purpose."		
Filing Fee (Check one box)			<u> </u>	hapter 11 D	ebtors	
Full Filing Fee attached		Check o ☐ Del	ne box:	•	fined in 11 U.S.C	S 8 101(51D)
						J.S.C. § 101(51D)
Filing Fee to be paid in installments (applicable to ind						P 11.
signed application for the court's consideration certify to pay fee except in installments. Rule 1006(b). See 0		ioic L				uding debts owed to ubject to adjustment
to pay fee except in instantions. Rule 1000(b). See	ome om om on.	on 4	/01/16 and every ti	hree years thei	reafter).	_
☐ Filing Fee waiver requested (applicable to chapter 7 in			ll applicable bo lan is being file		atition	
attach signed application for the court's consideration	. See Official Form 3B	Acc	eptances of the	plan were so	licited prepetitio	n from one or more
classes of creditors, in accordance with 11 U.S.C. § 1126(b).						
Statistical/Administrative Information Debtor estimates that funds will be available for distribution to	unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that, after any exempt property is excluded as		paid, there will be r	o funds available	for		
distribution to unsecured creditors. Estimated Number of Creditors						
1-49 50-99 100-199 200-999	1,000- 5,001- 5,000 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000	
Estimated Assets	10,000	•	·	,	,	
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million mil Estimated Liabilities	lion million	million	million			
\$0 to \$50,001 to \$100,001 to \$500,001 \$1,	D00,001 \$10,000,001	\$50,000,001	\$100,000,001 \$	500,000,001	More than	
\$50,000 \$100,000 \$500,000 to \$1 to	\$10 to \$50 lion million	to \$100 million		o \$1 billion	\$1 billion	

B1 (Official Fo	rm 1) (04/13)		Page 2		
Voluntary Pe	etition e completed and filed in every case)	Name of Debtor(s):			
(This page must be	All Prior Bankruptcy Cases Filed Within Last 8 Years	Sixto S. Castillo & Amberose s (If more than two, attach additional sheet)	Castillo		
Location Where Filed:	NONE	Case Number:	Date Filed:		
Location Where Filed:	N.A.	Case Number:	Date Filed:		
Pendi	ing Bankruptcy Case Filed by any Spouse, Partner or Aff	filiate of this Debtor (If more than one, attach	additional sheet)		
Name of Debtor:	NONE	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A	Exhib (To be completed if de			
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) I, the attorney for the petitioner named in the foregoing petition, declare the have informed the petitioner that [he or she] may proceed under chapter 7. 12, or 13 of title 11, United States Code, and have explained the reavailable under each such chapter. I further certify that I delivered to debtor the notice required by 11 U.S.C. § 342(b). Exhibit A is attached and made a part of this petition. X /s/ Charles R. Steinberg					
_		Signature of Attorney for Debtor(s)	Date		
No.		nibit D			
Exhibit D If this is a joint pe	If by every individual debtor. If a joint petition is filed, each and completed and signed by the debtor is attached and made a setition: Delta also completed and signed by the joint debtor is attached and signed by the joint debtor is att	part of this petition.	nibit D.)		
	O .	arding the Debtor - Venue ny applicable box)			
Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.					
	There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.				
	Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United Sates in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.				
	Certification by a Debtor Who Resi (Check all ap	des as a Tenant of Residential Prop	erty		
	<u> </u>				
	(Name of l	andlord that obtained judgment)			
_		of landlord)			
	Debtor claims that under applicable nonbankruptcy law, tentire monetary default that gave rise to the judgment for				
Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.					
	Debtor certifies that he/she has served the Landlord with	this certification. (11 U.S.C. § 362(1)).			

B1 (Official Form 1) (04/13)	Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Sixto S. Castillo & Amberose Castillo
	ntures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct.	
[If petitioner is an individual whose debts are primarily consumer debts and	I declare under penalty of perjury that the information provided in this petition
has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief	is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.
available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the	
petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).	(Check only one box.)
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are attached.
	Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
X /s/ Sixto S. Castillo	
Signature of Debtor	X
X /s/ Amberose Castillo	(Signature of Foreign Representative)
Signature of Joint Debtor	
	(Printed Name of Foreign Representative)
Telephone Number (If not represented by attorney)	(
	(Date)
Signature of Attorney*	Signature of Non-Attorney Petition Preparer
X /s/ Charles R. Steinberg Signature of Attorney for Debtor(s) CHARLES R. STEINBERG 23980 Printed Name of Attorney for Debtor(s) STEINBERG LAW FIRM PS Firm Name 323 North Miller Street Address Wenatchee, WA 98801	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
_509.662.3202	Printed Name and title, if any, of Bankruptcy Petition Preparer
Telephone Number Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) Address
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	X
The debtor requests relief in accordance with the chapter of title 11,	Date
United States Code, specified in this petition. X	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.
Signature of Authorized Individual	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11
Date	and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT Eastern District of Washington

In re_	Sixto S. Castillo & Amberose Castillo	Case No.
	Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit
counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: _	/s/ Sixto S. Castillo	
_	SIXTO S. CASTILLO	
Date:		

UNITED STATES BANKRUPTCY COURT Eastern District of Washington

In re_	Sixto S. Castillo & Amberose Castillo	Case No.
	Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Joint Debtor:	/s/ Amberose Castillo		
C	AMBEROSE CASTILLO		
Date:			

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

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In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor	(If known)	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
	Tota	ıl	0.00	

(Report also on Summary of Schedules.)

In re	Sixto S. Castillo & Amberose Castillo	Case No.
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Cash on hand.	X			
 Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. 		Checking account Cashmere Valley Bank	J	587.00
Security deposits with public utilities, telephone companies, landlords, and others.	X			
Household goods and furnishings, including audio, video, and computer equipment.		Kitchen table and chairs, microwave, TV, DVD player, bunk beds, beds, dressers, toys, bicycles, dining room table and chairs, couch, sofa, washing machine, dryer, refrigerator, computer, printer.	J	1,500.00
 Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. 		Misc pictures, video games.	J	50.00
6. Wearing apparel.		Clothing.	J	100.00
7. Furs and jewelry.		Misc earrings and necklaces.	J	100.00
Firearms and sports, photographic, and other hobby equipment.	X			
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			

In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor	(If known)	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
 Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each. 	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
 Automobiles, trucks, trailers, and other vehicles and accessories. 		2000 Chevy Silverado	J	4,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			

In re	Sixto S. Castillo & Amberose Castillo	Case No.	_
	Debtor	(If known)	_

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
31. Animals.		Pet dog.	J	1.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		Misc yard tools & mower.	J	250.00
		continuation sheets attached Total		\$ 6,588.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor	(If known)	

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the ex	emptions to	which debtor	is entitled under:	
(Check one box)				

V	11 U.S.C. § 522(b)(2)	☐ Check if debtor claims a homestead exemption that exceeds
	11 U.S.C. § 522(b)(3)	\$155,675*.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Checking account	(Husb)11 U.S.C. 522(d)(5)	587.00	587.00
Kitchen table and chairs, microwave, TV, DVD player, bunk beds, beds, dressers, toys, bicycles, dining room table and chairs, couch, sofa, washing machine, dryer, refrigerator, computer, printer.	(Husb)11 U.S.C. 522(d)(3)	1,500.00	1,500.00
Misc pictures, video games.	(Husb)11 U.S.C. 522(d)(6)	50.00	50.00
Clothing.	(Husb)11 U.S.C. 522(d)(3)	100.00	100.00
Misc earrings and necklaces.	(Husb)11 U.S.C. 522(d)(4)	100.00	100.00
2000 Chevy Silverado	(Husb)11 U.S.C. 522(d)(2)	0.00	4,000.00
Pet dog.	(Husb)11 U.S.C. 522(d)(5)	1.00	1.00
Misc yard tools & mower.	(Husb)11 U.S.C. 522(d)(5)	250.00	250.00
	Total exemptions claimed:	2,337.00	

^{*}Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor	(If known)	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			Security: 2000 Chevy Silverado					3,386.00
One Main Financial 1250 N. Wenatchee Ave., Ste.D Wenatchee, WA 98801		J	VALUE \$ 4,000.00				7,386.00	3,300.00
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(If applicable, report Summary of Certain Liabilities and Related Data.)

In re Sixto S. Castillo & Amberose Castillo	. Case No.
Debtor	(if known)

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related

Data

Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
□ Domestic Support Obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions

independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying

the

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

B6E (Official Form 6E) (04/13) - Cont.

In re Sixto S. Castillo & Amberose Castillo	Case No.
Debtor,	(if known)
Claims of partial forman and following to \$6.150* and forman and following	
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherm	ian, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals	
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rethat were not delivered or provided. 11 U.S.C. § 507(a)(7).	ntal of property or services for personal, family, or household use,
☐ Taxes and Certain Other Debts Owed to Governmental Units	
Taxes, customs duties, and penalties owing to federal, state, and local govern	umental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Institu	ution
Claims based on commitments to the FDIC, RTC, Director of the Office of TI Governors of the Federal Reserve System, or their predecessors or successors, to U.S.C. § 507 (a)(9).	
☐ Claims for Death or Personal Injury While Debtor Was Intoxicated	
Claims for death or personal injury resulting from the operation of a motor valcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	rehicle or vessel while the debtor was intoxicated from using
* Amounts are subject to adjustment on 4/01/16, and every three years ther adjustment.	reafter with respect to cases commenced on or after the date of
0 continuation sheets	s attached

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In re _	Sixto S. Castillo & Amberose Castillo ,	Case No
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State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Cap1/Kawas P O Box 30253 Salt Lake City, UT							1,956.00
ACCOUNT NO. Capital One P O Box 60599 City of Industry, CA 91716-0599							521.00
ACCOUNT NO. Capital One P O Box 60599 City of Industry, CA 91716-0599							949.00
ACCOUNT NO. Discover P O Box 6103 Carol Stream, IL 60197-6103							2,969.00
continuation sheets attached			S		otal otal		\$ 6,395.00 \$

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical

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In re _	Sixto S. Castillo & Amberose Castillo	,	Case No.	
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(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 64965026							
Enhanced Recovery Corporation 8014 Bayberry Rd. Jacksonville, FL 32256-7412							497.00
ACCOUNT NO.	t						
Home Depot P O Box 6028 The Lakes, NV 88901-6028							2,176.00
ACCOUNT NO.							
Jefferson Capital Systems, LLC P O Box 953185 St. Louis, MO 63195-3185							309.00
ACCOUNT NO.	t					Н	
Kay Jeweler's P O Box 1099 Wixon, MI 48393-1099							883.00
ACCOUNT NO.							
LHR, Inc. Law Offices of James Vaughan 14725 NE 20th Street, Ste.D-400 Vellevue, WA 98007							2,660.90
Sheet no. 1 of 3 continuation sheets attated Schedule of Creditors Holding Unsecured	ched			Sub	tota	>	\$ 6,525.90
Nonpriority Claims				Γ	otal	>	\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor	(If known)	

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
Macy's 9111 Duke Blvd. Mason, OH 45040							2,893.00
ACCOUNT NO.	+						
Macy's 9111 Duke Blvd. Mason, OH 45040							802.00
ACCOUNT NO.	+						
Midland Funding, LLC 8875 Aero Drive, SUite200 San Diego, CA 92123							1,120.00
ACCOUNT NO.	+			_			
Midland Funding, LLC 8875 Aero Drive, SUite200 San Diego, CA 92123							643.00
ACCOUNT NO.	+					Н	
Midland Funding, LLC 8875 Aero Drive, SUite200 San Diego, CA 92123							746.00
Sheet no. 2 of 3 continuation sheets a to Schedule of Creditors Holding Unsecured	ttached			Sub	tota	<u></u> ►	\$ 6,204.00
Nonpriority Claims				Т	otal	>	\$

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor	(If known)	

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
Portfolio Recovery Associates, LLC P O Box 12914 Norfolk, VA 23541							1,162.00
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no. 3 of 3 continuation sheets attact to Schedule of Creditors Holding Unsecured	hed			Sub	tota	>	\$ 1,162.00
Nonpriority Claims				T	`otal	>	\$ 20,286.90

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor		(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor		(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

NAME AND ADDRESS OF CREDITOR

Fill in this in	formation to identify y	our case:	
Debtor 1	Sixto S. Castillo First Name	Middle Name	Last Name
Debtor 2	Amberose Castillo	mode realic	Last Hame
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the: _	Eastern	District of WA
Case number			
(If known)			

Check i	f this is:
---------	------------

An amended filing

A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 61

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employm	ent					
Fill in your employment information.		Debtor 1			Debtor 2 or non-fi	ling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employe	ed		Employed X Not employed	
Include part-time, seasonal, or self-employed work.		Truck Driver				
Occupation may Include student or homemaker, if it applies.	Occupation					
7 11	Employer's name	Oak Harbor Fre	eight ———			
	Employer's address					
		Number Street			Number Street	
		City	State	e ZIP Code	City	State ZIP Code
	How long employed the	1.4				
Dani 2	Manthle					
Part 2: Give Details About	-	If			·	
Estimate monthly income as of spouse unless you are separated.		•	•		·	,
If you or your non-filing spouse had below. If you need more space, at			rmatio	on for all employers f	or that person on the line	es :
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly,			2.	\$4,722.44_	\$0.00	
3. Estimate and list monthly over	time pay.		3.	+\$0.00	+ \$0.00	
4. Calculate gross income. Add li	ne 2 + line 3.		4.	\$_4,722.44	\$0.00	

Official Form B 6I Schedule I: Your Income page 1

Debtor 1

First Name Middle Name Last Name

Case number (if known)______

				F	or Debtor 1			Debtor 2 of				
	Сор	y line 4 here	4.	\$_	4,722.44		\$_		00			
5 L	ist	all payroll deductions:										
		Tax, Medicare, and Social Security deductions	5a.	\$	747.32		\$	0.	00			
		Mandatory contributions for retirement plans	5b.	Ψ_	0.00		Ψ_ \$	0.	00			
		Voluntary contributions for retirement plans	5c.	φ_ \$_	0.00		Ψ_ \$_	0.	00			
		Required repayments of retirement fund loans	5d.	-	0.00		Ψ_ \$	0.	00			
		Insurance	5e.		0.00		Ψ_ \$	0.	00			
		Domestic support obligations	5f.	Ψ_ \$_	0.00		\$_ \$_	0.	00			
		•		Ψ_ \$_	0.00		\$	0.	00			
	·	Union dues	5g.		0.00			0	00			
		Other deductions. Specify:	5h.	*-	747.32		+ \$_		00			
6.	Add	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$_			\$_					
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,975.12		\$_	0.	00			
8.	List	all other income regularly received:										
	8a.	Net income from rental property and from operating a business, profession, or farm										
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00		\$_	0.	00			
	8b.	Interest and dividends	8b.	\$	0.00		\$	0.	00			
	8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive	nt	Ψ_								
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00		\$_	0.	00			
	8d.	Unemployment compensation	8d.	\$_	0.00		\$_	0.	00			
	8e.	Social Security	8e.	\$_	0.00		\$_	0.	00			
	8f.	Other government assistance that you regularly receive										
		Include cash assistance and the value (if known) of any non-cash assistant hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ice	\$_	0.00		\$_	0.	00			
		Specify:;	8f.									
	8g.	Pension or retirement income	8g.	\$_	0.00		\$_	0.	00			
	8h.	Other monthly income. Specify: ;	8h.	+\$_	0.00		+\$_	0.	00			
9.	Add	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00		\$_	0.	00			
		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	. \$_	3,975.12	+	\$_	0.	00	= \$_	3,975.	12
11.	Stat	e all other regular contributions to the expenses that you list in Scheo	dule .	J.								
	othe	ade contributions from an unmarried partner, members of your household, year friends or relatives.		•								
		not include any amounts already included in lines 2-10 or amounts that are	not a	vailab	le to pay expe	nse	s liste	d in <i>Sche</i> d		+ \$_	0.	00
	·	oify:		la !			L . 1		11.	· Ψ		
		the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of C					•		s 12.	\$	3,975.	12_
13		you expect an increase or decrease within the year after you file this	form	?							nthly inco	me
		No. Yes. Explain:										
		·										

Fill in this information to identify your case:		
Debtor 1 Sixto S. Castillo	Check if this is:	
First Name Middle Name Last Name Debtor 2 Amberose Castillo	An amended	1 filing
(Spouse, if filing) First Name Middle Name Last Name		nt showing post-petition chapter 13
United States Bankruptcy Court for the: Eastern District of	expenses as	s of the following date:
Case number(If known)	MM / DD / YY	
Official Form B 6J		iling for Debtor 2 because Debtor 2 separate household
Schedule J: Your Expenses		12/13
Be as complete and accurate as possible. If two married people are filin information. If more space is needed, attach another sheet to this form (if known). Answer every question.		
Part 1: Describe Your Household		
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file a separate Schedule J.		
2. Do you have dependents?	Dependent's relationship to	Dependent's Does dependent live
Do not list Debtor 1 and	Debtor 1 or Debtor 2	age with you?
Do not state the dependents'	daughter	11 No
names.	son	9 X Yes
	son	X Yes
	daughter	5 No X Yes
		No
3. Do your expenses include expenses of people other than yourself and your dependents?		⊺
Part 2: Estimate Your Ongoing Monthly Expenses		
Estimate your expenses as of your bankruptcy filing date unless you a expenses as of a date after the bankruptcy is filed. If this is a supplemental applicable date.	•	•
Include expenses paid for with non-cash government assistance if you		Varinavinanaa
of such assistance and have included it on Schedule I: Your Income (C	·	Your expenses
 The rental or home ownership expenses for your residence. Include any rent for the ground or lot. 	Tirst mortgage payments and 4.	\$1,500.00
If not included in line 4:		0.00
4a. Real estate taxes	4:	a. \$
4b. Property, homeowner's, or renter's insurance4c. Home maintenance, repair, and upkeep expenses	4	50.00
4d. Homeowner's association or condominium dues	4	• 0.00

Official Form B 6J Schedule J: Your Expenses page 1

Sixto S. Castillo
First Name Middle Name Last Name

Castillo Case number (if known)

		Your ex	rpenses
5. Additional mortgage payments for your residence, such as home equity loans	5 .	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	75.00
6b. Water, sewer, garbage collection	6b.	\$	100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	259.00
6d. Other. Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$	1,200.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$	150.00
Personal care products and services	10.	\$	0.00
Medical and dental expenses	11.	\$	50.00
2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	150.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
4. Charitable contributions and religious donations	14.	\$	0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	104.00
15d. Other insurance. Specify:	15d.	\$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
	10.		
7. Installment or lease payments:			225.00
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I).	18.	\$	0.00
9. Other payments you make to support others who do not live with you.			0.00
Specify:	19.	\$	
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	ome.		
20a. Mortgages on other property	20a.	\$	
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	
20d. Maintenance, repair, and upkeep expenses	20d.	\$	
20e. Homeowner's association or condominium dues	20e.	\$	0.00

Official Form B 6J Schedule J: Your Expenses page 2

Debtor	1	

Sixto S.	Castillo		
First Name	Middle Name	Last Name	

Case number (if known)_____

21. Other. Specify: School expenses, personal care items.	21.	+\$	250.00
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22.	\$	4,263.00
23. Calculate your monthly net income.		\$	3,975.12
23a. Copy line 12 (<i>your combined monthly income</i>) from <i>Schedule I</i>.23b. Copy your monthly expenses from line 22 above.	23a. 23b.	- \$	4,263.00
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-287.88
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?			
X No. Yes. Explain here:			

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United States Bankruptcy Court Sixto S. Castillo & Amberose Castillo District of Washington

In re		Case No.
	Debtor	
		Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 0.00		
B – Personal Property	YES	3	\$ 6,588.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 7,386.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	4		\$ 20,286.90	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 3,975.12
J - Current Expenditures of Individual Debtors(s)	YES	3			\$ 4,263.00
тот	TAL .	19	\$ 6,588.00	\$ 27,672.90	

United States Bankruptcy Court Eastern District of Washington

In re	Sixto S. Castillo & Amberose Castillo	Case No.	
	Debtor		
		Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the Following:

Average Income (from Schedule I, Line 12)	\$ 3,975.12
Average Expenses (from Schedule J, Line 22)	\$ 4,263.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 4,722.44

State the Following:

· · ·		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 3,386.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 20,286.90
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 23,672.90

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	Sixto S. Castillo & Amberose Castillo	
In re		Case No
	Debtor	(If known)

DECLARATION CONCERNING D DECLARATION UNDER PENALTY OF PERJUR	
I declare under penalty of perjury that I have read the foregoing summary an are true and correct to the best of my knowledge, information, and belief.	and schedules, consisting of 21 sheets, and that they
	/s/ Sixto S. Castillo
Date Signature:	Debtor
Date Signature:	/s/ Amberose Castillo
	(Joint Debtor, if any)
[If jo	int case, both spouses must sign.]
DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY	
I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as def compensation and have provided the debtor with a copy of this document and the notices 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U by bankruptcy petition preparers, I have given the debtor notice of the maximum amount accepting any fee from the debtor, as required by that section.	and information required under 11 U.S.C. §§ 110(b), J.S.C. § 110 setting a maximum fee for services chargeable
	ocial Security No. red by 11 U.S.C. § 110.)
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social s who signs this document.	security number of the officer, principal, responsible person, or partner
Address	
X	
X Signature of Bankruptcy Petition Preparer	Date
Names and Social Security numbers of all other individuals who prepared or assisted in preparing this docu	ament, unless the bankruptcy petition preparer is not an individual:
If more than one person prepared this document, attach additional signed sheets conforming to the approp	riate Official Form for each person.
A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankrup 18 U.S.C. § 156.	
DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF	F A CORPORATION OR PARTNERSHIP
I, the [the president or other officer or an or an authorized agent of the partnership] of the in this case, declare under penalty of perjury that I have read the foregoing summary and shown on summary page plus 1), and that they are true and correct to the best of my know	[corporation or partnership] named as debtor schedules, consisting ofsheets (total
Date Signature:	
[P1	rint or type name of individual signing on behalf of debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

 $[An\ individual\ signing\ on\ behalf\ of\ a\ partnership\ or\ corporation\ must\ indicate\ position\ or\ relationship\ to\ debtor.]$

UNITED STATES BANKRUPTCY COURT

Eastern District of Washington

DIATO	5. Casti	llo & Amberose Castillo				Case No	o	(if known)
		S	STATEMENT (OF FINA	NCIAL AF	FAIRS		
inform filed. provid indica or gua	formation nation for An indiv le the inf te payme	statement is to be completed for both spouses is combined both spouses whether or notificial debtor engaged in but formation requested on this ents, transfers and the like to the complete to the series of the ser	ned. If the case is ot a joint petition siness as a sole prostatement concern or minor children,	filed und is filed, u coprictor, ning all su state the c	ler chapter 12 nless the spot partner, famil ach activities a child's initials	or chapter 13, a uses are separate y farmer, or self as well as the ind and the name ar	marr d and -emp lividu nd add	ied debtor must furnish a joint petition is not loyed professional, sho al's personal affairs. T dress of the child's pare
space	complete is needed	Questions 1 - 18 are to be completed. Questions 19 - 25. If the all for the answer to any quest the number of the question	nswer to an application, use and atta	cable que	stion is "None	e," mark the box	label	ed "None." If addition
DEFI	NITIONS	3						
emplo in a tra their re	yed full- ade, busi "Insi elatives; ol of a con	quity securities of a corporatime or part-time. An indiviness, or other activity, other activity, other activity in the corporations of which the droporate debtor and their relatives. Solution (31).	ridual debtor also r than as an emplo cludes but is not l lebtor is an officer	may be "soyee, to su imited to r, director	in business" f applement incomment: relatives of to or person in	or the purpose o ome from the de he debtor; gener control; officers	f this ebtor's al par s, dire	form if the debtor eng s primary employment tners of the debtor and ctors, and any persons
	1. Iı		or operation of b	usiness				
None	State the d begin two y the b of the under	the gross amount of incomebtor's business, including paning of this calendar year tyears immediately preceding asis of a fiscal rather than a edebtor's fiscal year.) If a jr chapter 12 or chapter 13 meses are separated and a joint	e the debtor has repart-time activitie of the date this case g this calendar year material petition is filmust state income	eceived from the second	s an employee mmenced. St bottor that mai iscal year inc income for ea	e or in independente also the gross attains, or has made ome. Identify the chapters are spouse separate.	ent tra s amo aintain ne beg ately.	de or business, from the detailed during the ded, financial records of the ded, financial and ending date (Married debtors filing)
		AMOUNT			SOURCE			
20	14(db)	17882.08				FY: Jan	uary	to YTD
20	13(db)	44016.00				FY: Jan	uary	to December
201	12(db)					FV: Ian	marv	to Dogombor

2014(jdb)

2013(jdb)

2012(jdb)

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

None

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

One Time Financial

in ordinary course.



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternativerepayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

None

 \boxtimes

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

LHR, Inc. v. Castillo Collection Douglas County Superior

Court

Waterville, WA

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and Receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

 \boxtimes

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY OR
DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF AMOUNT OF

SETOFF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

B7 (Official Form 7) (04/13)

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Amberose Castillo

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE ENVIRONMENTAL LAW B7 (Official Form 7) (04/13) 8

None \boxtimes

List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None \boxtimes

If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS

NATURE OF BUSINESS BEGINNING AND

ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

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NAME ADDRESS

[Questions 19 - 25 are not applicable to this case]

Signature of Bankruptcy Petition Preparer

B7 (Official Form 7) (04/13)

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date Signature of Debtor SIXTO S. CASTILLO

Date Signature of Joint Debtor AMBEROSE CASTILLO

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

Date

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

Claimed as exempt

UNITED STATES BANKRUPTCY COURT Eastern District of Washington

Sixto S. Castillo & Amberose Castillo	
Debtor ,	Case No. Chapter 7
CHAPTER 7 INDIVIDUAL DEBTO ART A - Debts secured by property of the estate. (Part A recurred by property of the estate. Attach additional pages if necessaries	
Property No. 1	
Creditor's Name: One Time Financial	Describe Property Securing Debt: 2000 Chevy Silverado
Property will be (check one):	
If retaining the property, I intend to (check at least one):	
Redeem the property	
Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	
Property is (check one):	
	Not claimed as exempt
Property No. 2 (if necessary)	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one):	
☐ Surrendered ☐ Retained	
If retaining the property, I intend to (check at least one):	
☐ Redeem the property	
☐ Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	
Property is (check one):	

☐ Not claimed as exempt

B8 (Official Form 8) (12/08)

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)

Property No. 1 NO Leased Property		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
	\neg	
Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
		•
Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		□ YES □ NO
	v)	•
I declare under penalty of perjury that the		
Estate securing debt and/or personal pr	operty subject to an unexpired lease.	
Date:	/s/ Sixto S. Castillo	
	Signature of Debtor	
	/s/ Amberose Castille	0
	Signature of Joint Debte	or

United States Bankruptcy Court Eastern District of Washington

Sixto S. Castillo & Amberose Castillo Debtor	Case No(If known)
Deptor	(11 known)
	E TO CONSUMER DEBTOR(S) E BANKRUPTCY CODE
Certification of [Non-Attorney]	Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing t btor the attached notice, as required by § 342(b) of the Bankruptc	
otor the attached horice, as required by § 542(b) of the Bankrupto	cy Code
rinted name and title, if any, of Bankruptcy Petition Preparer address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
ignature of Bankruptcy Petition Preparer or officer, rincipal, responsible person, or partner whose Social ecurity number is provided above.	
Certification	of the Debtor
Certification (I, (We), the debtor(s), affirm that I (we) have received and read code	
I, (We), the debtor(s), affirm that I (we) have received and read	
I, (We), the debtor(s), affirm that I (we) have received and read ode Sixto S. Castillo & Amberose Castillo	the attached notice, as required by § 342(b) of the Bankruptcy

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Amberose Castillo

Cap1/Kawas P O Box 30253 Salt Lake City, UT

Capital One P O Box 60599 City of Industry, CA 91716-0599

Capital One P O Box 60599 City of Industry, CA 91716-0599

Discover P O Box 6103 Carol Stream, IL 60197-6103

Enhanced Recovery Corporation 8014 Bayberry Rd. Jacksonville, FL 32256-7412

Home Depot P O Box 6028 The Lakes, NV 88901-6028

Jefferson Capital Systems, LLC P O Box 953185 St. Louis, MO 63195-3185

Kay Jeweler's
P O Box 1099
Wixon, MI 48393-1099

LHR, Inc. Law Offices of James Vaughan 14725 NE 20th Street, Ste.D-400 Vellevue, WA 98007 Macy's 9111 Duke Blvd. Mason, OH 45040

Macy's 9111 Duke Blvd. Mason, OH 45040

Midland Funding, LLC 8875 Aero Drive, SUite200 San Diego, CA 92123

Midland Funding, LLC 8875 Aero Drive, SUite200 San Diego, CA 92123

Midland Funding, LLC 8875 Aero Drive, SUite200 San Diego, CA 92123

One Main Financial 1250 N. Wenatchee Ave., Ste.D Wenatchee, WA 98801

Portfolio Recovery Associates, LLC P O Box 12914 Norfolk, VA 23541

United States Bankruptcy Court Eastern District of Washington

	In re Sixto S. Castillo & Amberose Castillo	Case No)	
		Chapter	7	
	Debtor(s)			
	DISCLOSURE OF COMPENSATION	OF ATTORNEY FOR	DEBTOR	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cer and that compensation paid to me within one year before the filin rendered or to be rendered on behalf of the debtor(s) in contemp	g of the petition in bankrupto	cy, or agreed to	o be paid to me, for services
	For legal services, I have agreed to accept	\$	744.00	
	Prior to the filing of this statement I have received		744.00	
	Balance Due			
2.	The source of compensation paid to me was:			
	☑ Other (specify)			
3.	The source of compensation to be paid to me is:			
	Debtor			
4. asso	I have not agreed to share the above-disclosed compensatiociates of my law firm.	ion with any other person ur	less they are r	nembers and
	I have agreed to share the above-disclosed compensation of the law firm. A copy of the agreement, together with a list of the nar			
5.	In return for the above-disclosed fee, I have agreed to render le		•	
	a. Analysis of the debtor's financial situation, and rendering adviceb. Preparation and filing of any petition, schedules, statements ofc. Representation of the debtor at the meeting of creditors and co	affairs and plan which may b	e required;	
6.	By agreement with the debtor(s), the above-disclosed fee does no	ot include the following servic	es:	
	CE	ERTIFICATION		
	I certify that the foregoing is a complete statement of any debtor(s) in the bankruptcy proceeding.	agreement or arrangement	for payment to	me for representation of the
		/s/ Charles R. Steinbe	rg	
	Date	Sig	nature of Attor	rney
		STEINBERG LAW FI	RM PS	
		Na	me of law firm	

	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
In re Sixto S. Castillo & Amberose Castillo	☐ The presumption arises.
Debtor(s)	☐ The presumption does not arise.
Case Number:	\square The presumption is temporarily inapplicable.
(If known)	

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by §707(b)(2)(C).

	1 I A					
	Part I. MILITARY AND NON-CONSUMER DEBTORS					
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on					
	active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).					
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.					
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.					
1C	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;					
	b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.					

	Part II. CALCULATION OF MON	THLY I	NCOM	E FOR § 70	7(b)(7) EX	KCL	USION			
2	 Marital/filing status. Check the box that applies and a. ☐ Unmarried. Complete only Column A ("Deb b. ☐ Married, not filing jointly, with declaration of penalty of perjury: "My spouse and I are legal are living apart other than for the purpose of e Complete only Column A ("Debtor's Income") C. ☐ Married, not filing jointly, without the declarate Column A ("Debtor's Income") and Column d. ✓ Married, filing jointly. Complete both Column 	separate le ly separate vading the ae") for Le tion of separate n B (Spor	ome") for househo ded under e require ines 3-1 parate ho use's In	or Lines 3-11 dds. By check applicable no ements of § 70 1. buseholds set come) for Lin	ing this box on-bankrupt 07(b)(2)(A) out in Line 2 nes 3-11.	, delacy laction delaction, delac	otor declare nw or my sp e Bankrupt bove. Con	es und pouse cy Co aplete	and I ode."	
	for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. Column B Spouse's Income									
3	Income from the operation of a business, professionand enter the difference in the appropriate column(s business, profession or farm, enter aggregate number Do not enter a number less than zero. Do not includentered on Line b as a deduction in Part V.	ion or far) of Line a	rm. Sub 4. If you	operate more tails on an atta	e than one achment.	\$	4,722.44	\$	0.00	
	a. Gross receipts		\$		0.00					
	b. Ordinary and necessary business expenses	s	\$		0.00					
	c. Business income		Subtrac	t Line b from	Line a	\$	0.00	\$	0.00	
	Rent and other real property income. Subtract Lin in the appropriate column(s) of Line 5. Do not enter any part of the operating expenses entered on Lin	a number	less tha	n zero. Do n						
5	a. Gross receipts		\$		0.00					
	b. Ordinary and necessary operating expense	es	\$		0.00					
	c. Rent and other real property income		Subtrac	t Line b from	Line a	\$	0.00	\$	0.00	
6	Interest, dividends and royalties.					\$	0.00	\$	0.00	
7	Pension and retirement income.					\$	0.00	\$	0.00	
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; If a payment is listged in Column A, do not report that payment in Column B.						0.00	\$	0.00	
9	Unemployment compensation. Enter the amount in However, if you contend that unemployment compensation as a benefit under the Social Security Act, do not li Column A or B, but instead state the amount in the sum Unemployment compensation claimed to be a benefit under the Social Security Act Deb	sation rec	ceived b	y you or your	spouse	\$	0.00	\$	0.00	

10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. a. \$ 0.00 b. \$ 0.00 Total and enter on Line 10	\$ 0.00	\$ 0.00		
	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A,				
11	and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$ 4,722.44	\$ 0.00		
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$	4,722.44		
Part III. APPLICATION OF § 707(b)(7) EXCLUSION					
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.				
14	Applicable median family income. Enter the median family income for the applicable state at size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: Washington b. Enter debtor's household size:6	<u></u>	\$102,415.00		
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. ✓ The amount on Line 13 is less than or equal to the amount on Line 14. Check the "Th arise" box at the top of page 1 of this statement, and complete Part VIII; do not complete I ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining	Parts IV, V, VI	or VII.		

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)					
16	Enter the amount from Line 12.	\$	N.A.			
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.					
	a. \$					
	b. \$					
	c. \$					
	Total and enter on Line 17.	\$	N.A.			
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	N.A.			

		Part V. CA	LCULATION	OF I	DEDUCTION	NS FROM INCOM	ИE		
		Subpart A: Deduc	tions under St	andar	ds of the Into	ernal Revenue Ser	vice (IRS)		
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of person is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						\$	N.A.	
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.								
	Per	rsons under 65 years of age		Perso	ons 65 years of	age or older			
	a1	. Allowance per person	N.A.	a2.	Allowance p	per person	N.A.		
	b1	. Number of persons	N.A.	b2.	Number of p	persons			
	c1	Subtotal	N.A.	c2.	Subtotal		N.A.	\$	N.A.
20A	Utilit availa consi	Standards: housing and utilities ies Standards; non-mortgage eable at www.usdoj.gov/ust/ or sts of the number that would cumber of any additional depen	expenses for the a from the clerk of currently be allow	applical f the ba ved as e	ble county and inkruptcy court exemptions on	family size. (This in: .) The applicable far	formation is mily size	\$	N.A.
20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.								
	a.	IRS Housing and Utilities St	andards; mortgaş	ge/renta	al expense	\$	N.A.		
	b.	Average Monthly Payment f home, if any, as stated in Lir		ired by	your	\$	N.A.		
	c.	Net mortgage/rental expense				Subtract Line b from	n Line a	\$	N.A.
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:								
	_							\$	N.A.

	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation					
	regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.					
22A	\square 0 \square 1 \square 2 or more.					
	If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$	N.A.			
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more.					
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.					
	a. IRS Transportation Standards, Ownership Costs \$ N.A.					
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 N.A.					
	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.	\$	N.A.			
	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.					
24	a. IRS Transportation Standards, Ownership Costs \$ N.A.					
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 N.A.					
	c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.	\$	N.A.			
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.					
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.					
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.	\$	N.A.			
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.	\$	N.A.			

	Other Necessary Expenses: education for employment or for a physically or mentally challenged child.					
Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.						
Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.						
Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expended on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.						
Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.						
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32	\$	N.A.			
	Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32.					
	Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.					
	a. Health Insurance \$ N.A.					
	b. Disability Insurance \$ N.A.					
	c. Health Savings Account \$ N.A.					
34	Total and enter on Line 34.	\$	N.A.			
	If you do not actually expend this total amount, state your actual average expenditures in the space below: \$					
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$	N.A.			
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and					
37	Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS					
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	N.A.			

^{*}Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					\$	N.A.
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 (c)(1)-(2)					\$	N.A.
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.					\$	N.A.
		S	ubpart C: Deductions for De	ebt Payment			
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total Average Monthly payments on Line 42.						
42		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?		
	a.			\$	☐ yes ☐no		
	b.			\$	☐ yes ☐ no		
	<u> </u>			Total: Add Line a, b and c	yes no	\$	N.A.
43	Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the credito in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
43		Name of Creditor	Property Securing the Debt	1/60th of the	e Cure Amount		
	a.			\$			
	b.			\$			
	c.			<u> </u> \$		\$	N.A.
44	as pr	iority tax, child support and ali	claims. Enter the total amount, dividence of the claims, for which you were like igations, such as those set out in L	able at the time of y		\$	NΑ

		ter 13 administrative expenses. If you are eligible to file a case under Chapping chart, multiply the amount in line a by the amount in line b, and enter the se.						
	a.	a. Projected average monthly Chapter 13 plan payment. \$ N.A.						
45	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x N.A.					
	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$	N.A.			
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.							
		Subpart D: Total Deductions from Inc	ome					
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.							
		Part VI. DETERMINATION OF § 707(b)(2) PR	ESUMPTION					
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))							
-	Enter		\$	N.A.				
	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.							
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.							
	Initia	presumption determination. Check the applicable box and proceed as dire	ected.					
		e amount on Line 51 is less than \$7,475*. Check the box for "The presumpthis statement, and complete the verification in Part VIII. Do not complete the		top of page	e 1			
52	The amount set forth on Line 51 is more than \$12,475*. Check the "Presumption arises" box at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete remainder of Part VI.							
	The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Complete the remainder of Part VI (Lines 53 through 55).							
53	Enter	\$	N.A.					
54	Thres	0.25 and enter the result.	\$	N.A.				
		dary presumption determination. Check the applicable box and proceed as			_			
	The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not top of page 1 of this statement, and complete the verification in Part VIII.							
55	☐ TÌ	Check the box for "The prart VIII. You may also co						
		Part VII: ADDITIONAL EXPENSE CLA	AIMS					
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.							
		mount						
56	—		\$	N.A.				
	_).	\$	N.A.	-			
	'		\$	N.A.				
		Total: Add Lines a, b and c		N.A.	1			

^{*}Amounts are subject to adjustment on 4/1/2016, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Part VIII: VERIFICATION				
	I declare under penalty of perjury that the both debtors must sign.)	information prov	rided in this statement is true and correct. (If this a joint case,	
	Date:	_ Signature: _	/s/ Sixto S. Castillo (Debtor)	
57	Date:	_ Signature: _	/s/ Amberose Castillo (Joint Debtor, if any)	

Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	,722.44 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00	Income Month 2 Gross wages, salary, tips Income from business Rents and real property income Interest, dividends Pension, retirement	4,722.44 0.00	0
Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	Income from business Rents and real property income Interest, dividends	0.00	0
Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	Rents and real property income Interest, dividends		0.
Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	0.00 0.00 0.00 0.00	0.00 0.00 0.00	Interest, dividends		0.
Pension, retirement Contributions to HH Exp Unemployment Other Income	0.00 0.00 0.00	0.00 0.00		0.00	0.
Contributions to HH Exp Unemployment Other Income	0.00 0.00	0.00	Pension retirement	0.00	0.
Unemployment Other Income	0.00		1 chiston, retirement	0.00	0.
Other Income			Contributions to HH Exp	0.00	0.
Other Income	0.00	0.00	Unemployment	0.00	0.
		0.00	Other Income	0.00	0.
Income Month 3			Income Month 4		
Gross wages, salary, tips 4	,722.44	0.00	Gross wages, salary, tips	4,722.44	0.
Income from business	0.00	0.00	Income from business	0.00	0.
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.
Unemployment	0.00	0.00	Unemployment	0.00	0
Other Income	0.00	0.00	Other Income	0.00	0
Income Month 5			Income Month 6		
Gross wages, salary, tips 4	,722.44	0.00	Gross wages, salary, tips	4,722.44	0
Income from business	0.00	0.00	Income from business	0.00	0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0
Unemployment	0.00	0.00	Unemployment	0.00	0
Other Income	0.00	0.00	Other Income	0.00	0
Ado	litional 1	Items as	 Designated, if any		